01/17/2011 18:20

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 OTHER	For An Authorized Committee		mittee	Office Use Only	
1. NAME OF COMMITTEE			xample:If typing, type over the lines	<u> </u>	
COSTELLO FO	DR CONGRESS CO	MMITTEE			
				1 1 1 1 1 1	
ADDRESS (number	er and street) [P.O	BOX 8250			
Check if					
than prev reported.		EYILLE			62222
2. FEC IDENTIF	ICATION NUMBER	▼ CITY ▲		STATE	ZIP CODE ▲ STATE ▼ DISTRICT
C00238	444	3. IS THIS REPORT	NEW (N) OR	X AMENDED (A)	[IL] [12]
4. TYPE OF R (a) Quarterly	`	′	RE-Election Report for the:	_	
	l 15 Quarterly Report (Q		Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
	15 Quarterly Report (Q2 ober 15 Quarterly Report				in the State of
Janu	uary 31 Year-End Report	(YE) (c) 30-Day P (DST -Election Report for the:		
			General (30G)	Runoff (30R)	Special (30S)
Tern	nination Report (TER)	Election or			in the State of
5. Covering Perio	od 0 7	01 2010	through 0 9	30	2010
I certify that I have		d to the best of my knowled Mary Shalapin	ge and belief it is true, correct	and complete.	
Type of Fillit Ivallie					
Signature of Treasu				Date 0 1	17 2011
Office	ir or raise, errorieous, of	incomplete information may	subject the person signing th	 	FEC FORM 3
Use Only FE5AN018					(Revised 02/2003)